



PATENT
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Sarah Wilcox

Printed name of person mailing correspondence

Signature of person mailing correspondence

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Denise L. Faustman Confirmation No.: 3056
Serial No.: 10/698,734 Art Unit: 1644
Filed: October 31, 2003 Examiner: Belyavskyi, Michail A.
Customer No.: 21559
Title: METHODS OF ORGAN REGENERATION USING HOX11-
EXPRESSING PLURIPOTENT CELLS (As Amended)

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF SUPPLEMENTAL APPLICATION DATA SHEET

Enclosed is a Supplemental Application Data Sheet in connection with the above-referenced application. No new matter has been added by the corrections.

If there are any charges or any credits, please apply them to Deposit Account No. 03-2095.

Respectfully submitted,

Todd Armstrong, Ph.D.
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Date: September 12, 2007
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Supplemental Application Data Sheet

Application Information

Application number: 10/698,734
Filing Date: 10/31/03
Application Type: Regular
Subject Matter: Utility
Suggested Classification:
Suggested Group Art Unit:
CD-ROM or CD-R?: None
Number of CD disks:
Number of copies of CDs:
Sequence submission?:
Computer Readable Form (CRF)?:
Number of copies of CRF:
Title: METHODS OF ORGAN REGENERATION USING
HOX11-EXPRESSING PLURIPOTENT CELLS
(As Amended)
Attorney Docket Number: 00786/405003
Request of Early Publication?: No
Request of Non-Publication?: No
Suggested Drawing Figure:
Total Drawing Sheets: 11
Small Entity?: Yes
Petition Included?: No
Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.? : No

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: US

Status: Full Capacity

Given Name: Denise

Middle Name: L.

Family Name: Faustman

Name Suffix:

City of Residence: Boston

State or Province of Residence: MA

Country of Residence: US

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Correspondence Information

Correspondence Customer Number: 21559

Representative Information

Representative Customer Number: 21559

Domestic Priority Information

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This Application	Continuation-In-Part of	10/358,664	02/05/03
10/358,664	An application claiming the benefit under 35 USC 119(e)	60/392,687	06/27/02

Foreign Priority Information

Country:	Application Number:	Filing Date:	Priority Claimed:
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Assignee Information

Assignee name:	The General Hospital Corporation
Street of mailing address:	55 Fruit St.
City of mailing address:	Boston
State of Province of mailing address:	MA
Country of mailing address:	US
Postal or Zip Code of mailing address:	02114